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PETITION FOR EXTENSION OF	ΓIME UNDER 37 CFR 1.136(a	Docket Number (Optional) TJK/213				
IPE	In re Application of Hiroyuki Otaki					
O'I' E'R	Application Number 10/072,201	Filed February 7, 2002				
()AIT 1 3 500R PR	For Photosensitive Composition for Vo	lume Hologram				
This is a request under the provisions of	Group Art Unit 1756	Examiner Martin Angebrenndt				
This is a request under the provisions of reply in the above identified application.	37 CFR 1.136(a) to extend the perio	d for filing a				
The requested extension and appropriate (check time period desired):	e non-small-entity fee are as follows					
☐ One month (37 CFR 1.17(a)	(1))	\$				
☐ Two months (37 CFR 1.17(a)(2))	\$				
	(a)(3))	\$ 1,020.00				
☐ Four months (37 CFR 1.17(a	n)(4))	\$				
☐ Five months (37 CFR 1.17(a)(5))	\$				
 □ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ □ A check in the amount of the fee is enclosed. □ Payment by credit card. Form PTO-2038 is attached. 						
The Commissioner has already be application to a Deposit Account.	en authorized to charge fees in this					
application to a Deposit Account. ☑ The Commissioner is hereby authorized to charge any fees which may be required,						
or credit any overpayment, to Deposit Account Number 19-1351 . I have enclosed a duplicate copy of this sheet.						
I am the applicant/inventor						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
□ attorney or agent of record. □ attor						
attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)						
WARNING: Information on this for be included on this form. Provide						
1/14/1/5						
Date	(Si	griature				
7/18/2005 WABDELR1 00000034 10072201	Timothy J. Keef	er, Reg. No. 35,567				
2 FC:1253 1020.00 OP		ped or printed name				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
☐ Total of 1 forms are submitted						

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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	10	Effecti	ve on 12/08	3/2004.		
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FEEDERANSMITTAL

for FY 2005

TOTAL AMOUNT OF PAYMENT (m) 04 04 0 00

Complete If Known				
Application Number	10/072,201			
Filing Date	February 7, 2002			
First Named Inventor	Hiroyuki Otaki			
Examiner Name	Martin Angebrenndt			
Art Unit	1756			
Attorney Docket No.	TJK/213	$\overline{}$		

TOTAL AMOUNT OF FA	· · · ·	(\$)\$1,010.00			1010/21		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account 1	Deposit Account	Number: <u>19-135</u>	1	_ Deposit Accour	nt Name: <u>SEYF</u>	ARTH SHAW LLP	
For the above-iden	tified deposit	account, the Dire	ector is hereby a	uthorized to: (che	ck all that apply	/)	
Charge fee(s)	indicated belo	ow .	ſ	Charge fee(s) indicated belo	w, except for the	e filina fee
Charge any ac	dditional fee(s	or underpayme	ents of fee(s)	Credit any ov		on, oncoperor and	
under 37 CFR WARNING: Information on th			ك edit card informati			form. Provide cred	lit card
information and authorizatio							
FEE CALCULATION							
1. BASIC FILING, SEA					=>/		
	FILING F		SEARCH I		EXAMINA	ATION FEES	
Application Type	Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	<u> </u>
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	. 0	0	0	
2. EXCESS CLAIM FEES Small Entity							
Fee Description Fee (\$)						Fee (\$)	
Each claim over 20 (inc			`			50	25
Each independent claim		luding Reissue	es)			200	100
Multiple dependent clai	ıms Extra Cla	ims Fee	(\$) Fees Pa	id (\$)		360 Multiple Depe	180 Indent Claims
- 20 or HP		x	=			Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims	Extra Cla		<u>(\$) </u>	<u>id (\$)</u>			
- 3 or HP = x =							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50= (round up to a whole number) x =							
4. OTHER FEE(S) Fee Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): RCE Filing Fee; Three-Month Extension Fee \$1,810.00				\$1,810.00			

SUBMITTED BY			
Signature		Registration No. 35,567 (Attorney/Agent)	Telephone 312-346-8000
Name (Print/Type	imothy J. Keef		Date 7/14/(25

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.